

MINUTES
of the First Meeting of the
Surgical First Assistants' Technical Review Committee

March 6, 2015
12:00 p.m. to 3:00 p.m.
Lower Level Conference Room "F"
The Nebraska State Office Building, Lincoln, NE

Members Present

Diane Jackson APRN (Chairperson)
Ben Greenfield, LP
Michael F. Kinney, J.D.
Judith Lee Kissell, PhD
Mary C. Sneckenberg
Jeff Baldwin, Pharm. D., R.P.
James Temme, R.T.

Members Absent

Staff Present

Matt Gelvin
Ron Briel
Marla Scheer

I. Call to Order, Roll Call, Approval of the Agenda

Diane Jackson called the meeting to order at 12:00 p.m. The roll was called; a quorum was present. She welcomed all attendees and asked the committee members to introduce themselves. The agenda and Open Meetings Law were posted and the meeting was advertised online at http://dhhs.ne.gov/Pages/reg_admcr.aspx. The committee members unanimously approved the agenda.

The committee members unanimously agreed to adopt the following method of notifying the public about the date, time, and content of their meetings:

- Agendas for these meetings are posted on the Credentialing Review component of the Department of Health and Human Services website, and can be found at http://dhhs.ne.gov/Pages/reg_admcr.aspx
- Agendas for these meetings are posted on the Licensure Unit bulletin board located on the third floor of the Nebraska State Office Building near the receptionists' area and on the northeast corner of the first floor of the Nebraska State Office Building where the Licensure Unit has been relocated.

II. Orientation of the Committee Members to the Credentialing Review Program

Chairperson Jackson introduced the program staff for the purpose of orienting the committee members to the Credentialing Review Program. Mr. Gelvin conducted the orientation. A copy of this presentation was made available to the committee members at the beginning of the meeting. Copies of this presentation were made available to other attendees, as well.

III. Presentation of the Application by the Applicant Group

Applicant group representative Jason Petik CEO of the Sidney Regional Medical Center, gave an overview of the proposal to license Surgical First Assistants and create a registry for Surgical Technologist in Nebraska.

Applicant group representative Bruce Rieker indicated that the Surgical First Assistants would be licensed and have a scope of practice and the Surgical Technologists would have their job responsibilities but no scope of practice. However, the proposal is seeking creation of a state registry to maintain a census of and monitor Surgical Technologists. Mr. Rieker further indicated that three committees helped created the proposal based on the following three areas: 1) The parameters of the scope of practice, 2) The level of education and experience for licensure, 3) The level of supervision.

IV. Initial Questions for the Applicant Group by the Committee Members

Mr. Temme and Ms. Sneckenberg asked the applicants to explain the difference between Surgical Assistants and Surgical Technologists. Applicant group representative Linda Shoemaker, stated that the Surgical Technologist is an entry level position with no scope of practice with the next level being a certified surgical technologist. The Surgical First Assistant has additional education and training and stands at the right hand of the surgeon. A representative from the Association of Surgical Technologists further indicated that Surgical Technologists do not alter tissue at all whereas a Surgical Assistant can place stitches and alter tissue. Pages 11 and 12 of the proposal outlines duties of a Surgical Assistant. Pages 13 and 14 of the proposal outlines the duties of the Surgical Technologist.

Mr. Greenfield indicated there are 15 – 20 Surgical Assistants versus 600 Surgical Technologists in Nebraska. He suggested that it may be a beneficial to create a scope of practice and license Surgical Technologists then provide for the opportunity to become Surgical Assistants. He said it would solidify what Surgical Technologists do which is a high profile public health issue in the operating room referring to maintaining a sterile field. He does not want the work of the Surgical Technologists to be devalued. Mr. Patrick expressed some concern about making it mandatory for Surgical Technologists to be licensed and the potential burden that would be placed on them to access education especially those that work in greater Nebraska. Mr. Rieker said Licensing Surgical Technologists may be worthy of consideration and further stated that Surgical Assistants sometimes have professional relationships with surgeons and may assist with 10 or more surgeries in a day providing better patient care and efficiency.

Questions were asked concerning who trains Surgical Technologists, who supervises them and where does the buck stop? Mr. Rieker stated that the Physician would be supervising and in charge of the Operating Room and reiterated that the Surgical Technologists have a job description, are subject to compliance and are also accountable to the hospital in which they work. The committee asked the applicant group to expand on definitions for supervision. Mr. Rieker indicated that direct supervision means the Physician is immediately available and personal supervision means the Physician is in the operating room.

Dr. Kinney asked if a license was created would the cost of care to the patient increase. Mr. Patrick stated that they are not looking to add additional expense to the patient, however they are looking to add quality outcomes for the best interest of the patient. It was further indicated that the number of professionals in the operating room performing a procedure doesn't dictate the charge, the charge is per procedure.

Dr. Baldwin asked how this affects Physician Assistants and if the education system is ready to accept new students. Physician Assistants can currently function as a Surgical Assistant. A Surgical Technologist could acquire the education necessary to become a Surgical Assistant. However, there is currently no incentive to do this because Surgical Assistants are not recognized in Nebraska so they could not perform the activities they are trained to do. There are currently, 500 Certified Surgical Technologist programs across the country with 2 of such programs in Nebraska. There are 9 Certified Surgical First Assistant programs available. However, there is no such program in Nebraska.

Mr. Patrick provided an overview of a survey that occurred at the Sidney Regional Center and it was discovered during the survey that a Surgical First Assistant was working in Nebraska performing those duties. Since the Surgical First Assistant is not licensed or recognized in Nebraska they had to alter their practice and this created a ripple effect across Nebraska because there were other Surgical First Assistants performing such duties at various locations throughout Nebraska. This resulted in Surgical First Assistants being allowed to only perform the duties of a Surgical Technologist.

Dr. Kinney observed that Illinois, Kentucky, Texas and the District of Columbia are the only states that license Surgical First Assistants and asked if this was a new phenomenon. A representative from the applicant group discussed the national board list of various states with licensure, certification or registry. Ms. Jackson requested this information to be sent to the committee members through the program staff.

Mr. Temme asked what the requirements are in regard to CEU's for Surgical First Assistants and Surgical Technologists. There were a variety of answers given by representatives including Surgical First Assistants receiving 100 hours within a 4 year period approved by the National Board, 60 hours every 4 years for Surgical Technologists with the CEU's being easily accessible to complete. Mr. Rieker indicated the CEU requirements are outlined in the proposal. Mr. Patrick discussed that CEU's shows what they can and can't do. He further stated there are medical staff involved, bylaws and rules and regulations for the professions, best practices prevail.

Dr. Baldwin indicated that he would send requests for a variety of citations and definitions in regard to the proposal.

V. Comments by Other Interested Parties

A Cardio Technologists from Bryan Hospital stated they are trained to suture. However they can't in the state of Nebraska. She cited a law from the late 1800's that a Physician cannot delegate their duties to an unlicensed professional.

VI. Schedule Additional Meetings

The following meeting dates and times were selected by the committee members:

- April 8th, 2015, 1:00 p.m. to 4:00 p.m.
- May 6th, 2015, 1:00 p.m. to 4:00 p.m.
- May 27th, 2015, 1:00 p.m. to 4:00 p.m.
- June 18th, 2015, 1:00 p.m. to 4:00 p.m.

VII. Public Comment

There were no public comments at this time.

VIII. Next Steps

The next step in the review process on this proposal is to continue examining the proposal keeping the four statutory criteria for initial credentialing in mind.

IX. Other Business and Adjournment

There being no further business, the meeting was adjourned by acclamation at 2:20 p.m.